Salary 2

APPLICATION FOR UNITED STATES PATENT Decimation and Power of ttorney

As a below named inventor, I hereby declare that:

•	my residence, post office address and c	irizenship are as	stated below ne	xt to my nan	ne; that		
	I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Measurement Apparatus Including A Track For A						
_	Measurement Scale And Apparatus For Tensioning The Scale						
	described and claimed in the specification:						
_	Check one *a. ☒ attached hereto. b. ☐ filed on as	Application Ser	ial No.		and amended	on(if applicable)	
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.						
	I acknowledge the duty to disclose information of which I am aware which is material to the examination of this appliation in accordance with Title 37, Code of Federal Regulations, §1.56(a). Under Title 35, U.S. Code §119, the priority enefits of the following foreign application(s) filed within one year prior to this application are hereby claimed:						
	United Kingdom Patent Appl United Kingdom Patent Appl						
	The following applications for patent or inventor's certificate on this invention were filed in countries foreign to the Jnited States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-amed foreign priority application(s):						
	If there are no corresponding applications, insert "NONE". None						
	I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:						
	James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411 and Edward P. Walker, Reg. No. 31,450						
	ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.						
	I hereby declare that I have reviewed at herein of my own knowledge are true and th further that these statements were made with able by fine or imprisonment, or both, under statements may jeopardize the validity of the	at all statements the knowledge Section 1001 of	s made on inform that willful fals Title 18 of the	mation and b e statements United State:	elief are believe and the like so	ed to be true; and made are punish-	
	Typewritten Full Name of Sole or First Inventor	James	R	Her	nshaw		
		Given Name	Middle Initial	Fami	ily Name		
ı	Inventor's Signature	M	Leuch				
_		UNO	V .	16	2000	ク	
•	Date of Signature	Month		Day	Year		
	Stroud	Glouces	tershire	-	United	Kingdom	
	Residence	State or Pro	State or Province Country				
	Citizenship United Kingdom	1 7 1 1 7					
	Post Office Address (Insert complete mailing	1 Field Place, Paganhill, Stroud, Gloucestershire, GL5 4BB, United Kingdom					
	*This form may be executed only when att						
•	"This form may be executed only when at						

**Note to Inventor: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE **D



PAGE 2 OF U.S.A. DECLARATION RM (Discard this page in a sole inventor application)

Peter G Holden Typewritten Full Name of Second Joint Inventor (if any) Given Name Middle Initial Family Name Inventor's Signature NOVEM Date of Signature Day Month Cirencester Gloucestershire United Kingdom Residence City State or Province Country United Kingdom Citizenship 39 Ouerns Lane, Cirencester, Post Office: Address (Insert complete mailing Gloucestershire, GL7 1RL, United Kingdom address, including country) Richard Typewritten Full Name of **Hoodless** Third Joint Inventor (if any) Given Name Middle Initial Family Name Inventor's Signature 00 Novembr Date of Signature Day United Kingdom Month Bristo@ Residence City State or Province Country United Kingdom Citizenship Flat No. Cambridge Park, Redland, N₈ Post Office Address ļ. (Insert complete mailing Bristol, BS6 رن address, including country) 6XN, United Kingdom 맺 Thomas Typewritten Full Name of Mackintosh Fourth Joint Inventor (if any) Given Name Middle Initial Family Name Inventor's Signature 2 000 Navember 2000 Date of Signature 715 Year Bristo1 United Kingdom Residence *6 City Country State or Province United Kingdom Citizenship Fishponds, Bristol Road, Post Office Address (Insert complete mailing BS16 4BS address, including country) United Kingdom Da**x⁄i**d 3 Typewritten Full Name of R McMurtry Fifth Joint Inventor (if any) Giyen Name Middle Initial Family Name Inventor's Signature tre Date of Signature Month Day Year Wotton-under-Edge Gloucestershire Residence United Kingdom City State or Province Country Republic of Ireland Citizenship 20 Tabernacte Road, Wotton-under-Edge, 8 Post Office Address (Insert complete mailing Gloucestershire, GL12 7EF, United Kiṅgḍom address, including country)

^{*}Note to Inventors: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.